

PROWERS COUNTY SHERIFF'S OFFICE
103 E Oak St. Lamar, CO 81052-0391
719-336-8050 719-336-7900 fax

PHYSICIAN'S REPORT OF SERIOUS BODILY INJURY

Case # _____ Date: _____

Patient's Name: _____ DOB: _____

Reported Incident:

DEFINITION - C.R.S. 18-1-901(3)(p): " Serious Bodily Injury" means bodily injury which, either at the time of the actual injury or at a later time, involves a substantial risk of death, a substantial risk of permanent disfigurement, a substantial risk of protracted loss or impairment of the functions of any part or organ of the body, or breaks, fractures, or burns of the second or third degree.

I, Doctor _____ have read and understand the legal definition of serious bodily injury and in my opinion, the injuries sustained by _____ DOES meet that definition / DOES NOT meet that definition. My opinion is based upon the following list of major injuries the patient received:

Signed: _____ Date: _____

Physician's Office Address:

Physician's Office Phone: () _____

Deputy obtaining Physician's Statement:

Location where Statement was obtained:
